



U.S. Department  
of Transportation  
**National Highway  
Traffic Safety  
Administration**

## Auto Safety Hotline

**Vehicle Owner's Questionnaire**

NATIONWIDE 1-800-424-9393  
DC METRO AREA (202) 366-0123  
INTERNET: <http://www.nhtsa.dot.gov>

**FOR AGENCY USE ONLY 258**

Date Received

07-FEB-2002

Od or

rt dt

pd rt

rp lr

Reference No.

757908

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? ☐ YES ☐ NO  
In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.

Signature of Owner \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**VEHICLE INFORMATION**

|                                                                                                                                          |                                      |                                       |                             |                          |
|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|---------------------------------------|-----------------------------|--------------------------|
| Vehicle Ident. No. (VIN)<br><small>(Location at bottom of<br/>windshield and driver's side<br/>door)</small><br><b>1C4GP64L6VB309498</b> | Vehicle Make<br><b>CHRYSLER TRUC</b> | Vehicle Model<br><b>TOWN AND COUN</b> | Vehicle Year<br><b>1997</b> | Current Odometer Reading |
|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|---------------------------------------|-----------------------------|--------------------------|

|                                                                                            |                                                                                                                               |                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                        |
|--------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Purchase Date<br><b>01-SEP-1997</b>                                                        | Dealer's Name _____                                                                                                           | Engine Size<br>(CID/CC/L) <b>3.8L</b>                                                                                                                                                                                                                           | <input type="checkbox"/> Turbo<br><input type="checkbox"/> Diesel<br><input type="checkbox"/> Gas<br><input checked="" type="checkbox"/> Fuel Injection                                                                |
| <input type="checkbox"/> New <input checked="" type="checkbox"/> Used                      | City _____ State _____ Zip Code _____                                                                                         | No Cylinders _____                                                                                                                                                                                                                                              |                                                                                                                                                                                                                        |
| Transmission Type<br><input type="checkbox"/> Manual<br><input type="checkbox"/> Automatic | Antilock Brakes<br><input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No                                     | Restraint System<br><input checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt<br><input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Bel<br><input type="checkbox"/> Passengerside Airbag                     | Cruise Control<br><input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No                                                                                                                               |
|                                                                                            | Drive Train<br><input checked="" type="checkbox"/> Front<br><input type="checkbox"/> Rear<br><input type="checkbox"/> 4-Wheel | Vehicle Type<br><input type="checkbox"/> Car <input type="checkbox"/> Sport Util<br><input type="checkbox"/> Van <input type="checkbox"/> Truck<br><input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle<br><input type="checkbox"/> Other _____ | Body Style<br><input type="checkbox"/> 2-Door<br><input type="checkbox"/> 4-Door<br><input type="checkbox"/> Stationwagon<br><input type="checkbox"/> Pick Up Truck<br><input checked="" type="checkbox"/> Other _____ |

**FAILED COMPONENT(S)/PART(S) INFORMATION**

|                                           |                                                                                                               |                                                                                                                                          |                                                                                            |
|-------------------------------------------|---------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| Component<br><b>09500000<br/>12110000</b> | Part Name(s)<br><b>COMMUNICATIONS:HORN ASSEMBLY<br/>INTERIOR SYSTEMS:PASSIVE RESTRAINT:AIR BAG</b>            | Location<br><input type="checkbox"/> Left <input type="checkbox"/> Right<br><input type="checkbox"/> Front <input type="checkbox"/> Rear | Failed Part's<br><input type="checkbox"/> Original<br><input type="checkbox"/> Replacement |
| No of Failure                             | Date(s) of Failure(s) <b>05-AUG-2001</b><br>Mileage at Failure(s) <b>98000</b><br>Vehicle Speed at Failure(s) | Failed Part(s)<br><input type="checkbox"/> Yes <input type="checkbox"/> No                                                               | NHTSA Previously<br><input type="checkbox"/> Yes <input type="checkbox"/> No               |

**APPLICATION INCIDENT INFORMATION**

(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies) on the back of this form)

|                                                                   |                                                                             |                           |                      |                          |                                                                                           |
|-------------------------------------------------------------------|-----------------------------------------------------------------------------|---------------------------|----------------------|--------------------------|-------------------------------------------------------------------------------------------|
| Crash<br><input type="checkbox"/> Yes <input type="checkbox"/> No | Fire<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Number of Persons Injured | Number of Fatalities | Estimated Property Damag | Reported to Police<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|-------------------------------------------------------------------|-----------------------------------------------------------------------------|---------------------------|----------------------|--------------------------|-------------------------------------------------------------------------------------------|

**NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)**

BROUGHT VEHICLE TO CHRYSLER DEALER IN BLOOMINGTON, MN. THEY SAID THAT THIS WAS A COMMON FAILURE IN CHRYSLER MINI VANS. HOWEVER, IT IS NOT A CHRYSLER PROBLEM, BUT UP TO THE OWNER TO REPAIR. ESTIMATED AT \$300.00 COST. ALSO CALLED CHYSLER CORPORATE CUSTOMER SERVICE, SAME ANSWER: TOO BAD, THEY ERRORED AT MY EXPENSE. THIS IS A FAMILY VEHICLE AND I DON'T CONSIDER THE HORN AND AIRBAGS FRILLS. ADDITIONALLY, I UNDERSTAND THAT CHRYSLER HAS ALREADY REPLACED OVER 124,000 OF THESE PARTS AT OWNER EXPENSE. \*AK

CONTINUE ON REVERSE

The Privacy Act of 1974-Public Law 93-579 This information is requested pursuant to authority vested in the National Highway Traffic Safety Act and subsequent amendments. You are under no obligation to respond to this questionnaire. Your response may be used to assist the NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If the NHTSA proceeds with administrative enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.